

PART B - FEE(S) TRANSMITTAL



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36257 7590 07/01/2003

PARSONS HSUE & DE RUNTZ LLP
655 MONTGOMERY STREET
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<u>Eileen Bowen</u>	(Depositor's name)
<u>Eileen Bowen</u>	(Signature)
<u>9/30/03</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/549,451	04/14/2000	Charles Bluth	M-8231 US	8923

TITLE OF INVENTION: HEALTH CARE INFORMATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	10/01/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
ASTORINO, MICHAEL C	3736	600-300000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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- 1 Parsons Hsue
- 2 & de Runtz LLP
- 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Computerized Screening, Inc.

Sparks, Nevada

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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Parsons de Runtz September 30, 2003
 (Authorized Signature) (Date)

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01 FC:1501
 02 FC:8001

1300.00 OP
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